

DEPARTMENT OF THE NAVY BUREAU OF NAVAL PERSONNEL 5720 INTEGRITY DRIVE MILLINGTON TN 38055-0000

5720 PERS 00J6/20190272 March 8, 2019

Ms. Mary Schantag POW Network 102 Vixen Circle Unit C Branson, MO 65616

Dear Ms. Schantag:

SUBJECT: YOUR FREEDOM OF INFORMATION ACT (FOIA) REQUEST

This is in response to your Freedom of Information Act (FOIA) request in which you seek a copy of Official Military Personnel File (OMPF) information pertaining to Jacob T. Telquist. Your request was received in this office on March 8, 2019, and has been assigned FOIA correspondence file number CNPC20190272 by this command.

A releasable copy of available responsive information is enclosed. The redacted portions of the provided documentation are exempt from disclosure under FOIA exemption 6 [5 U.S.C. § 552(b)(6)]. Release of such information would be a clearly unwarranted invasion of the personal privacy of Jacob T. Telquist.

Because your request is partially denied by this command, you are advised of your right to appeal this determination in writing to the Office of the Judge Advocate General, OJAG Code 14, 1322 Patterson Avenue SE Suite 3000, Washington Navy Yard, DC 20374-5066.

If an appeal is deemed necessary, it must be received in that office within 90 calendar days from the date of this letter, in order to be considered. To expedite an appeal, you should enclose a copy of this letter and a copy of the original request along with a statement regarding why your appeal should be granted. The letter of appeal and the envelope should bear the notation, "FOIA/PA APPEAL."

I am the official responsible for the partial denial of your request. Should you wish to discuss the processing of your request, you may contact the undersigned at (901) 874-3165. You may also contact the DON FOIA Public Liaison, Christopher Julka, at Christopher.a.julka@navy.mil or (703) 697-0031.

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You may contact the Office of Government Information Services (OGIS) as they provide a voluntary mediation process for resolving disputes between persons making FOIA requests and the Department of the Navy (DON). For more information, please go to:

https://www.archives.gov/ogis/about-ogis/contact-information.

Sincerely,

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D.P. German

D. P. GERMAN FOIA/PA Officer By direction

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY This Report Contains Information Subject to the Privacy Act of 1974, As Amended.								
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RIBBONS AWARDED OR AUTHORIZED (All periods of service)	OR AUTHORIZED (All periods of service) year completed)							
NATIONAL DEFENSE SERVICE MEDAL (1);NAVY	RECRUIT TRAINING, 8 WKS, MAY14; BASIC SUBMARINE							
EXPEDITIONARY MEDAL (1);GW-TERRORISM SERVICE	DÂMAGE CONTROL, 1 WKS, JUN14; BASIC ENLISTED							
MEDAL (1);NAVY EXPERT PISTOL SHOT MEDAL	SUBMARINE, 9 WKS, JUL14; A							
(1);NAVY EXPERT RIFLEMAN MEDAL (1);NAVY GOOD	WKS, AUG14; TACTICAL CON							
CONDUCT MEDAL (1);SEA "SEE REMARKS"	5 WKS, OCT14; ELECTRON TE	ECH SUBS	S "SEE RE	MARKS"				
15a. COMMISSIONED THROUGH SERVICE ACADEMY YES X NO								
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec 210	7b)		YES	X NO				
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 10.)	YES	X NO				
16. DAYS ACCRUED LEAVE 17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE YES NO								
PAID DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION								
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The information contained herein is subject to computer matching within the Department purposes and to determine eligibility for, and/or continued compliance with, the require	ent of Defense or with any other affected Fede	eral or non-Fe	deral agency	for verification				
purposes and to determine eligibility for, and/or continued compliance with, the require 19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code)	ments of a Federal benefit program.							
194. WAILING ADDRESS AFTER SEPARATION (Include ZIP Code)	b. NEAREST RELATIVE (Name and ac	ldress - includ	le ZIP Code)					
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20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) a. MEMBER REQUESTS COPY/3 BE SENT TO THE CENTRAL OFFICE	OFFICE OF VETER	ANS AFFAI						
AFFAIRS (WASHINGTON, DC)	OF THE DEPARTMENT OF VETERAL	15						
21a. MEMBERISIGNATURE b. DATE 22a. OFFICIAL	AUTHORIZED TO SIGN (Typed name, g	rade, title, sig	nature) b.	DATE				
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SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)								
23. TYPE OF SEPARATION	24. CHARACTER OF SERVICE (Include							
Discharged								
25. SEPARATION AUTHORITY	26. SEPARATION CODE	27. REEN	RY CODE	11.				
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28, NARRATIVE REASON FOR SEPARATION								
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)		30. MEMBE	R REQUES	TS COPY 4				
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HISTORY OF ASSIGNMENTS



DATE GAINED	TYPE GAIN	ACTIVITY	UIC	DATE OF LOSS	TYPE LOSS
03/11/2014	TEMDU	S CRU TRCOM GTLK	30646	05/10/2014	
03/12/2014		S CRU TRCOM GTLK	30646	05/10/2014	TRF
05/10/2014	TEMDU	S NSS GROTON CT	30565	07/16/2014	TRF
07/16/2014	TEMDU	S NSS GROTON CT	30565	€09/08/2014	TRF
09/08/2014	DUIN	S NSS GROTON CT	30565	04/10/2015	TRF
04/29/2015	TEMDU	NSSC NLON CT OTH	44292	05/06/2015	TRF
05/06/2015	DUTY	SSN 757 ALEX	21465	03/07/2018	TRF
03/07/2018	DUTY	CSPR W C SMMS/PM	44978	10/25/2018	DIS

NAME (LAST, FIRST MIDDLE)

TELQUIST, JACOB THOMAS

SOCIAL SECURITY NUMBER

RANK/RATE

ETVSN

NAVPERS 1070/605

Official NSIPS/ESR form printed this date: 10/29/2018

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